

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014472

FILED
Feb 12, 2006
Secretary of State

Entity Name: NOTES LEHRMAN PROPERTIES, LLC

Current Principal Place of Business:

6919 JULIE ANN CT.
FT. MYERS, FL 33919

New Principal Place of Business:

835 S. TOWN AND RIVER DR.
FT. MYERS, FL 33919

Current Mailing Address:

6919 JULIE ANN CT.
FT. MYERS, FL 33919

New Mailing Address:

835 S. TOWN AND RIVER DR.
FT. MYERS, FL 33919

FEI Number: 20-2235822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOTES, JOEL S
6919 JULIE ANN CT.
FT. MYERS, FL 33919 US

Name and Address of New Registered Agent:

NOTES, JOEL S
835 S. TOWN AND RIVER DR.
FT. MYERS, FL 33919 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

02/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NOTES, JOEL S
Address: 6919 JULIE ANN CT.
City-St-Zip: FT. MYERS, FL 33919

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NOTES, JOEL S
Address: 835 S. TOWN AND RIVER DR.
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM () Change (X) Addition
Name: WANDA, NOTES C
Address: 835 S. TOWN AND RIVER DR.
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM () Change (X) Addition
Name: LEHRMAN, WAYNE S
Address: 2 ROSE ST.
City-St-Zip: STAFFORD, VA 22554

Title: MGRM () Change (X) Addition
Name: LEHRMAN, JANE L
Address: 2 ROSE ST.
City-St-Zip: STAFFORD, VA 22554

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOEL S. NOTES

MGR

02/12/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date